FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB AF	PROVAL
OMB Number	
Expires: A	oril 30,2008 erage burden
hours per resp	onse16.00

SEC U	SE ONLY
Prefix	Serial
DATE	RECEIVED
1	1

Name of Offering (  check if this is an amendment and name has changed, and indicate change.)	
Texakoma Beckville #1 Prospect	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	RECEIVED
A. BASIC IDENTIFICATION DATA	OCT 1 2005
1. Enter the information requested about the issuer	061 ± 1.000
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Texakoma Operating, L.P.	185/49
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
5400 LBJ Freeway, Suite 500, Dallas, TX 75240	(972)701-9106
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business To initiate, manage, acquire, supervise ventures and to otherwise engage in the exploration business.	
Type of Business Organization  corporation business trust limited partnership, already formed limited partnership, to be formed	lease specify): PROCESSED
Actual or Estimated Date of Incorporation or Organization:    Month   Year	OCT 2 0 2005
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A.BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition	of, 10% or more of	f a class of equity securities of the issu
Each executive officer and director of corporate issuers and of corporate general and man	naging partners of	partnership issuers; and
• Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Texakoma Exploration & Production, L.L.C.  Business or Residence Address (Number and Street, City, State, Zip Code)		
5400 LBJ Freeway, Suite 500, Dallas, Texas 75240		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Stapleton, William Dale		
Business or Residence Address (Number and Street, City, State, Zip Code)		· · · · · · · · · · · · · · · · · · ·
5400 LBJ Freeway, Suite 500, Dallas, Texas 75240		
Check Box(es) that Apply: Promoter Beneficial Owner 🗵 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Kennedy, Scott Durand  Business or Residence Address (Number and Street, City, State, Zip Code)		
5400 LBJ Freeway, Suite 500, Dallas, Texas 75240		
Check Box(es) that Apply: Promoter Beneficial Owner 🗷 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Kennedy, Shea Peter	`	
Business or Residence Address (Number and Street, City, State, Zip Code)		
5400 LBJ Freeway, Suite 500, Dallas, Texas 75240		
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer	. Director	General and/or Managing Partner
Full Name (Last name first, if individual)		**************************************
Kennedy, Dean Richard		
Business or Residence Address (Number and Street, City, State, Zip Code)		
5400 LBJ Freeway, Suite 500, Dallas, Texas 75240		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	<ul><li>General and/or</li><li>Managing Partner</li></ul>
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
(Use blank sheet, or copy and use additional copies of this s	sheet, as necessary	·)

					B. ÎN	FORMATI	ON ABOU	I/OFFERI	NG:				
1.	Has the	issuer sold	, or does th	e issuer in	tend to sel	l, to non-ac	ccredited in	nvestors in	this offeri	ng?	·	Yes X	No
						Appendix,		_				, 17,	000
2.	2. What is the minimum investment that will be accepted from any individual?							ֆ					
3.	Does the	e offering p	ermit joint	ownershi	o of a singl	e unit?		······································			•••••	Yes <b>E</b>	No □
4.											irectly, any he offering.		
	If a perse	on to be list	ed is an ass	ociated pe	rson or age:	nt of a brok	er or deale	r registered	d with the S	EC and/or	with a state		
		, list the na or dealer,								ciated pers	ons of such		-
	•	ast name f											
		a Finar Residence			Ctront Ci	. State 7	'i= Codo)						<del></del>
		J Freev				-		240					
Na	me of Ass	ociated Br	oker or Dea	ıler							····		
Sta	tes in Wh	ich Person	I icted Hac	Solicited	or Intends	to Solicit I	Purchasers						
010									······································			☐ All	States
	ĀL	ĀK				196	[CT]	DE	DC	<b>SE</b>	GA	HI	( <del>)</del>
		IN	IA	KS	×	LA	ME	DE.	MA	MI	MN		MO
	MT	NE		NH	×	NM	NY		ND	OH	DK	×	PA
	RJ	SC	SD	TN	<b>X</b>	UT	VT			WV	WI	WY]	PR
Fu.	ll Name (I	Last name f	first, if indi	vidual)	· · · · · · · · · · · · · · · · · · ·						<u></u>		
Bu	siness or	Residence	Address (N	Jumber an	d Street, C	ity. State. 2	Zip Code)						
Na	me of Ass	ociated Br	oker or Dea	iler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		••••••		••••••			☐ Al	l States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA
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. Fu	II Name (I	Last name i	first, if indi	vidual)								·	
Bu	siness or	Residence	Address (N	Jumber an	d Street, C	ity, State, 2	Zip Code)				· <u> </u>		
Na	me of Aco	ociated Br	aler or Dec	ler									· · · · · · · · · · · · · · · · · · ·
iva	ine of Ass	ociace Di	OKCI OI DO	1101									
Sta	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)										States			
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	$\overline{VT}$	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C: OFFERING PRICE; NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box $\Box$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	B	\$
	Equity	S	\$
	Common Preferred		
	Convertible Securities (including warrants)	5	\$
	Partnership Interests		\$
	Other (Specify Fractional Undivided Working Interests	5,100,000	\$ 306,000
	Total	5,100,000	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors 4	of Purchases § 306,000
	Accredited Investors		Ψ
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees	n	\$
	Engineering Fees		\$
	Engineering Fees Sales Commissions (specify finders' fees separately) (includes due diligence	·)	\$_612,000
	Other Expenses (identify) (Expense reimbursement)		\$ 153,000
	Total	•	<sub>\$</sub> 765,000

		iber of investors, expenses a	ND USE OF PROCEEDS	
and total expens	ses furnished in response to Part C —	ring price given in response to Part C — - Question 4.a. This difference is the "a	djusted gross	\$_4,335,000
each of the pur check the box t	rposes shown. If the amount for a	roceed to the issuer used or proposed to ny purpose is not known, furnish an of of the payments listed must equal the ac rt C — Question 4.b above.	estimate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fe	es	•.	\$	
			<u> </u>	
Purchase, rent	al or leasing and installation of ma	· ·	<del></del>	
		cilities	<del></del>	
offering that m	other businesses (including the value) of the used in exchange for the asset to a merger)		[] \$	
Repayment of	indebtedness		\$	_ [ \$
Working capit	al			
completi	ng and equipping of o	ting and if warranted, ne well to be drilled t	to an C&E	\$1,434,006
approx.	total measured vertic	al depth of 10,500 ft	in Panola	□.\$
Column Totals	5		\$	
Total Payment	s Listed (column totals added)	2 t	\$_4	,335,000
		D. FEDERAL SIGNATURE		
he issuer has duly ignature constitute	caused this notice to be signed by the	e undersigned duly authorized person.  urnish to the U.S. Securities and Excha  credited investor pursuant to paragrap	. If this notice is filed under Ru ange Commission, upon writt	ale 505, the following
ssuer (Print or Typ	pe)	Signature Alasta	Date	
	erating, L.P.	www synde	10/7/05	
Name of Signer (Pr <b>William Sta</b>		P:	resident of Texako roduction, L.L.C. ts General Partner	<del>-</del>

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)